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APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\*  
none NM

\*\* FOREIGN APPLICATIONS \*\*\*\*\*  
NM

IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
\*\* 02/12/2001 none NM

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY CA	SHEETS DRAWING 5	TOTAL CLAIMS 25	INDEPENDENT CLAIMS 5
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Verified and Acknowledged  
Examiner's Signature: [Signature] Initials: NM

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TITLE  
Support mobile device in asymmetric link environment

FILING FEE RECEIVED 960	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue )
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